MAIL TO: Office of the Attorney General Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 l Street Sacramento, CA 95814 Telephone: (916) 323-5079

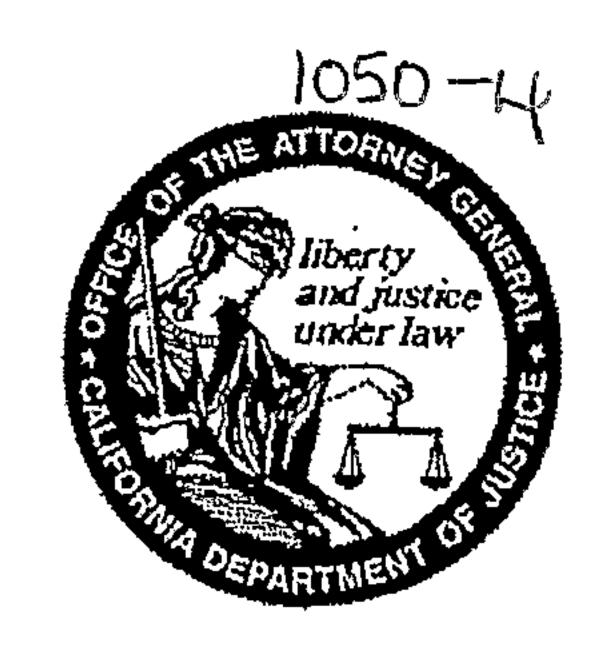
WEB SITE ADDRESS: http://ag.ca.gov/charities/

## COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

## ANNUAL FINANCIAL REPORT FOR 20 03 (California Government Code Section 12599)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code Section 12586.1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:		Name and Address of Charitable Orga	Name and Address of Charitable Organization:			
		CTNo. LESS F.E.I.N. No.	23.719992			
1050			TOURCITE SUNDROME ASSOC.			
PLAN A	DIVE CHITE C	Name of charity				
457 N. CANON DRIVE, SUITE C BEVERLY HILLS, CA 90210		· · · · · · · · · · · · · · · · · · ·	42-20 BELL BLVD.			
		Address of charity  AMSIDE VIV	361			
		City, State, and ZIP code of charity				
Figures from (check one):	National Campaign   California Can	npaign				
FUNDRAING AN	MRDS DINNER held (on) (from	Decourage 1 mon2	FBBUARY 26, 20 03			
(Type of activ		(Date or dates must be shown)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Is the contract between the con if other, provide bri	nmercial fundraiser and charity based upon a ef explanation	a fee or percentage of revenue? Fee 🔲 Percentage	□ Other □			
1. REVENUE						
A. Cash contributions		229824 A.				
B. Entertainment sales o	r admission charges	1,103,437 B.	• •			
C. Sales from products		C.				
D. Advertisement sales	•	<u>52,600</u> D.	•			
E. Membership fees		E,				
F. Other sources: (Spec	;ify) ·					
a. 	······································	Fa.	•			
D	······································	Fb,				
d. `		Fc. Fd.				
G. TOTAL REVENUE			1,385,261 g.			
2. EXPENSES		•				
A. Fees or commissions	•	25,000 00 A.				
B. Salaries		А. В.	•			
C. Payroll taxes	a e empe					
D. Employee benefits		D.				
E. Cost of merchandise f	or resale	52,149.02 E.	•			
F. Cost of entertainment		<u>13562</u> F.				
G. Postage		24, 926. 21 G.				
H. Advertising	•	3,247,19 H.				
<ul><li>I. Telephone</li><li>J. Rental of equipment</li></ul>		- 1.694.42.1.	• •			
K. Facilities charge		<u> </u>	:			
L. Permits						
M. Other expenses: (Spe	cify)					
a. IRA	VEL/HOTEL	8,717.98 Ma.				
b	PATROOM ATTENDANT	135.31 Mb.				
c. <u>J</u>	ECORATIONS_	1,089.50 Mc.				
d		Md.	100 - 21			
N. TOTAL EXPENSES		•	124, 309.41 N.			
•						

## COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES ANNUAL FINANCIAL REPORT FOR 20\_03\_

ANNUAL FINANCIAL REPORT FOR 20 <u>07</u>	
(California Government Code Section 12599)	

Page 2

3. Amount to charity (subtract line 2N from line 1G)			1,262,	151.603.	
4. Less additional fundraising expenses paid by charity incl	All Expenses listed 4. on pg. 1 section 2				
5. Less fair market value of goods and/or services used for	5.				
6. Net proceeds realized by charity from the campaign (subt					
7. (a) Does any officer, director, partner or owner of the confidence of the following of the confidence of the following of the confidence of the confidenc		l over, directly or	indirectly, the charita	able organizatio	
Name of officer, director, partner or owner of commercial fundraiser			Relationship of officer, etc. to charitable organization		
		~		•	
		÷	"		
(b) For each affiliation identified in 7(a), attach copy of the Under penalties of perjury, I declare that I have examined this belief, it is true, correct and complete.			and to the best of m	y knowledge and	
	TORINJINISON	FIVE T CO	MONTANT	12/15/03	
Signature of authorized officer (commercial fundraiser)	Printed name		Title	Date	
This report must be signed by two officers or directors of the o	charitable organization for verification.			/ ,	
	JEFFEU KRAME	R Co	CHMR	12/16/2)	
Signature of authorized officer/director (charity)	Printed name		Title	Date	
	J. MARIC LEVINE	VPI	ENELLAN	IGNT	
Signature of authorized officer/director (charity)	Printed name		Title	Date	
	-	•			
		#F • #2 • •	<sup>7</sup> តំ មា ១៩ ដែល <b>ខ្</b> ព <b>់ក្រុង ខេត្ត</b> ប្រ <b>ាក្សាសុស</b> មេខ្	•	
tooz g z NHC			; r	:	